

*Emc*  
*10/10/00*  
*10/18/00*

| POSITION                  | INITIALS  | ID NO.      | DATE           |
|---------------------------|-----------|-------------|----------------|
| FEE DETERMINATION         | <i>PS</i> | <i>6621</i> | <i>8/31</i>    |
| O.I.P.E. CLASSIFIER       |           | <i>780</i>  | <i>9/6/00</i>  |
| FORMALITY REVIEW          | <i>MM</i> |             | <i>10/6/00</i> |
| RESPONSE FORMALITY REVIEW |           |             |                |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 --- (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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